## **Lemont Hunter** (703) 305-3588

## PATENT APPLICATION -EE DETERMINATION RECORD Effective October 1, 2001

plication or Docket Number 10/069009

		CLAIMS A	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS							ſ	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			∖⊋ minus 20=					X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS					•			X42=		OR	X84=	
MC	JLTIPLE DEPEN	NDENT CLAIM P					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							<b>.</b>	TOTAL		OR	TOTAL	890
CLAIMS AS AMENDED - PART II											OTHER	
(Column 1)				(Column		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
<b>AMENDMENT A</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CLAIM	=		X42=		OR	X84=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	,
								TOTAL ODIT. FEE		OR ,	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)								<u></u>	•	NDO11.1 C.L.	
AMENDMENT B		CLAIMS		HIGH	EST		Г		ADDI-			ADDI-
		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		E		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	PENDENT	CLAIM			+140=		OR	+280=	
								TOTAL DIT. FEE			TOTAL	
										J., 7	ADDIT. FEE	
		(Column 1) CLAIMS		(Colum		(Column 3)	_	-		-		
AMENDMENT C	ر پايا د د	REMAINING AFTER AMENDMENT		PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=			X84=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
**	the "Highest Nur	mber Previously Pa mber Previously Pa	id For" IN THIS	S SPACE is	less than	20, enter "20."	AD	DIT. FEE		OR A	TOTAL ODIT. FEE	
i	The *Highest Num	ber Previously Paid	d For" (Total or	Independe	nt) is the	highest number	r found	I in the app	ropriate box	in colu	ımn 1.	